Attorney Docket No. 2121-0178P

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING



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NIED DECLADATION AND DOMED OF AUG

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

	miverinon entitled:	,) mater is claimed and for	which a patent is sought on the		
Insert Title:	PRENATAL DIAGNO	SIS METHOD ON ISOLATED FO	ETAL CELL OF MATERNAL BLOOD			
- Fill in Appropria Information - For Use Without Specification Attached:	the specification of wh forth above and/or the The specification United States App and amended on	ich is attached hereto. If not attache e following: was filed on <u>October 30, 2003</u> plication Number <u>10/695,744</u>	ned hereto, the application is identified by	as		
	the specification was filed on <u>April 30, 2002</u> International Application Number <u>PCT/FR02/01505</u> amended on			as PCT		
	amended on	ucation Number <u>PC1/FR02/0150</u>	5	; and was		
				/if a==1:=-1 1 \		
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.					
٠	thereof, or patented or year prior to this application date of this application representative or assign patent or inventor's cer application by me or my I hereby claim fore or inventor's certificate I a filing date before that	do not believe the same was ever described in any printed publica cation, that the same was not in just that the invention has not been in in any country foreign to the iss more than twelve months (six bificate on this invention has been a legal representatives or assigns, eign priority benefits under Title 2 isted below and have also identified the application on which priority of the application on which priority.	known or used in the United States of Arrition in any country before my or our invoublic use or on sale in the United States patented or made the subject of an inven United States of America on an application on the Grant of the United States of States of America on the United States of America on the United States of States of America on the United States of Stat	nerica before my or our invention thereof or more than one of America more than one year tor's certificate issued before the ation filed by me or my legal ion, and that no application for d States of America prior to this		
Insert Priority	Prior Foreign Applica	tion(s)	y = canada.	_		
Information:	01/05824	FRANCE		Priority Claimed		
(if appropriate)	(Number)	(Country)	April 30, 2001 (Month/Day/Year Filed)	Yes No		
	(Number)	(Country)	(Month/Day/Year Filed)	Yes No		
	(Number)	(Country)	(Month/Day/Year Filed)	Yes No		
	(Number)	(Country)	(Month/Day/Year Filed)	Yes No		
Insert Provisional		under Title 35, United States Cod	e, §119(e) of any United States provisional	applications(s) listed below.		
Application(s): (if any)	(Application Number)		(Filing Date)			
	(Application Number)		(Filing Date)			
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:					
Insert Requested Information: if appropriate)	Country	Application Number	Date of Filing (Month	n/Day/Year)		
	Code. 6112 Lacknowledge	of States and/or PCT application	de, \$120 of any United States and/or PCT ras the subject matter of each of the clain the manner provided by the first paragn n which is material to the patentability as the filing date of the prior application.	anh of Title 35 United Cut-		
nsert Prior U.S. pplication(s): f any)	(Application Number)	(Filing Date)	(Status - patented, per	iding, abandoned)		
ege 1 of 2 ev. 05/2004)	(Application Number)	(Filing Date)	(Status - patented, pen	ding, abandoned)		

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

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CUSTOMER NO. 02292 (BIRCH, STEWART, KOLASCH & BIRCH, LLP)

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Pull Name of First or Sole Inventor:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE* a.f			
Full Name of First or Sole Inventor: Insert Name of Inventor → Insert Date This Document is Signed	Patrizia PATERLINI-BRECHOT	Derlin-Brit	let !	DATE* 2325 200			
Insert Residence	Residence (City, State & Country)		CITIZENSHIP	, , , , , , , , , , , , , , , , , , ,			
Insert Citizenship →	Paris, FRANCE	FRENCH					
Insert Post Office Address →	MAILING ADDRESS (Complete Street Address including City, State & Country)						
	35 boulevard Pasteur, F-75015 Paris, FRANCE						
Full Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
	Residence (City, State & Country)		CITIZENSHIP				
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
rull Name of Third Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
	Residence (City, State & Country)		CITIZENSHIP				
	MAILING ADDRESS (Complete Street Ad	ddress including City, State & Country)					
ull Name of Fourth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
	Residence (City, State & Country)		CITIZENSHIP				
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
ill Name of Fifth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	I	DATE*			
	Residence (City, State & Country)		CITIZENSHIP				
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
li Name of Sixth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	Г	PATE*			
	Residence (City, State & Country)	CITIZENSHIP					
	MAILING ADDRESS (Complete Street Address including City, State & Country)						